

Report to the Legislature

FISCAL STATUS REPORT CONSOLIDATION OF RESIDENTIAL HABILITATION CENTERS

SECOND ENGROSSED SUBSTITUTE HOUSE BILL 1087 Chapter 50, Laws of 2011, Section 205(4) 62nd Legislature 2011 1st Special Session

December 5, 2011

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Legislative Requirement

Chapter 50, Laws of 2011, Section 205(4) of the 62nd Legislature

The appropriations in this subsection are subject to the following conditions and limitations:

Amounts appropriated in this subsection are for the purposes of transitioning clients with developmental disabilities into community settings. The department is authorized as needed to use these funds to either pay for clients residing within a residential habilitation center or for placements in the community. Pursuant to Second Substitute Senate Bill No. 5459 (services for people with developmental disabilities), funding in this subsection must be prioritized for the purpose of facilitating the consolidation and closure of Frances Haddon Morgan Center. The department shall use a person-centered approach in developing the discharge plan to assess each resident's needs and identify services the client requires to successfully transition to the community or another residential habilitation center. The department is authorized to use any savings from this effort for the purpose of developing community resources to address the needs of clients with developmental disabilities who are in crisis or in need of respite. The department shall track the costs and savings of closing Frances Haddon Morgan Center and any investments into community placements and resources. The department shall provide a fiscal progress report to the legislature by December 5, 2011.

Executive Summary

Consolidating the Residential Habilitation Centers:

One of the state Residential Habilitation Centers (RHCs), the Frances Haddon Morgan Center (FHMC), was closed on December 31, 2011. Families and guardians were able to receive their first choice of new service type and early quality assurance surveys indicated families were generally satisfied with their new services. The FHMC clients were all moved from the center about six weeks prior to the set closure date.

Physical campus use was curtailed incrementally as clients and employees left the center. Supplies, materials and equipment have been re-used, re-purposed or transferred to other DSHS locations. Over thirty employees left for other Department of Social and Health Services (DSHS) jobs with very short transfer schedules, thus mitigating the cost of extended lay off notifications and waiting periods.

Additional support for individuals and families to choose where they wanted to move is estimated to have increased the residential habilitation center (RHC) costs by over \$600,000 per year.

New admissions have been stopped at the Yakima Valley School (YVS) RHC pursuant to Chapter 30, Laws of 2011, continuing the consolidation efforts.

Also pursuant to Chapter 30, Laws of 2011, a legislative task force assigned to study the Developmental Disabilities System of Services, will provide a study to the Legislature in December 2012. This study will provide additional insight and recommendations regarding the system of services for persons with developmental disabilities and the state's long-term needs for RHC capacity.

Fiscal Impact of Closing the Frances Haddon Morgan Center:

Chapter 50, Laws of 2011 authorized the department to use the budget for FHMC to transition clients to another setting. Any savings could be used to develop additional community resources. Therefore the budget for the closure of FHMC and associated new community services equals the FHMC biennial allotment of \$19,906,000.

In Fiscal Year 2012, the department projects a savings of \$109,000 in state funds but an over expenditure of \$432,000 in total funds (state and federal funds combined). This is primarily due to the need to fund services for clients in two locations simultaneously while they transitioned from one setting to another. Services remained in place at FHMC until December 2011. At the same time,

services were developed and implemented at three other RHCs and at community residential programs.

Fiscal Year 2013 estimates project \$1.2 million will be saved from the available allotment. The higher savings expected in the second fiscal year is due the completion of one-time, transition costs such as the complete closure of FHMC and clients not needing as many supports due to successfully adjusting to their new homes and residences.

The \$1.2 million savings in Fiscal Year 2013 will be applied to establishing new community programs as directed by Chapter 30, Laws of 2011. The statute directs the department to provide up to eight (8) crisis stabilization beds and mobile specialty services throughout the state within available funds.

The available funds from closing FHMC will nearly fund one new, four-person community treatment team and one new, three-bed crisis stabilization facility for children in Fiscal Year 2013. Providing a second crisis stabilization program for two adults will cost approximately \$2.1 million beyond the currently available funds.

Background

Chapter 50, Laws of 2011 directed the Department of Social and Health Services to:

- Close FHMC by December 31, 2011;
- Plan for the eventual closure or reconfiguration of YVS;
- Establish new state operated community based crisis centers for both children and adults;
- Establish a new state operated clinical treatment team; and
- Expand respite services.

At the beginning of 2011, the department operated five RHCs. The RHC population was reduced by 57 individuals by the beginning of 2012.

Facility	Location	Jan 2011 residents	Jan 2012 residents	Status
Frances Haddon Morgan Center	Bremerton	55*	0	Closed
Fircrest School	Shoreline	203	213	Open
Lakeland Village	Medical Lake	216	216	Open
Rainier School	Buckley	358	350	Open Admissions
Yakima Valley School	Selah	92	88	frozen
	Total Residents	924	867	

^{*}Note: 52 clients were affected by the closure; 3 short-term clients returned to family homes at the beginning of 2011

Frances Haddon Morgan Center Closure:

Fifty-two (52) FHMC clients were moved. The last few clients left on November 16, 2011. Clients and their families or guardians were offered their choice to relocate to either a privately operated community supported living option, a state operated living alternative (SOLA) or to one of four remaining RHCs.

Of the 52 people involved:

• Twenty one (21) chose to move to another state-run RHC;

• Thirty one (31) chose to move to a community home; 17 of these were state operated; 14 were private vendor homes.

One person passed away.

The last FHMC employee left the center on December 31, 2011.

Yakima Valley School Closure or Reconfiguration:

2SSB 5459 legislation directed the department to:

- Not permit any new admission to YVS unless such admission is limited to the provision of short-term respite or crisis stabilization services;
- No current permanent client of YVS shall be required or compelled to relocate to a different care setting as a result of the act;
- YVS shall continue to operate as a residential habilitation center until such time that the census of permanent clients has reached sixteen persons; and
- As part of the closure plan, at least two cottages will be converted to state operated living alternatives.

On July 1, 2011, the department implemented an admission freeze at YVS except for short-term respite and crisis stabilization needs.

To date, there has been no movement of long-term clients from YVS.

- No clients have passed away
- No client has made the choice to move from YVS
- YVS continues to provide routine and planned short-term admissions based on family requests

There has been no fiscal impact from the YVS admissions freeze.

New Community Based Services and System Changes:

Second Substitute Senate Bill 5459 (2SSB 5459) legislation directed the development of three new services:

• State operated community based services for crisis intervention for children and adults; up to eight (8) crisis stabilization beds established in different geographic areas where there is the greatest need.

- State operated community based treatment team to offer similar clinical expertise that can be found at the RHCs.
- Expand community respite for families as funding allows; up to eight (8) respite beds established in geographic areas where there is the greatest need.

As of publication of this report, none of these three new services have begun serving individuals.

2SSB 5459 did not set a date for opening of these services. The Division of Developmental Disabilities (DDD) expected to have all available by the time FHMC closed. However, challenges in procuring appropriate community housing for the crisis stabilization service has delayed its' opening. A home in Lakewood is currently leased for this new service. As of this report, the community-based crisis stabilization and treatment teams are in the hiring process. Expanded community respite contracts are pending. All three services should be operational by the beginning of Fiscal Year 2013.

Budget Phases

An institution closure has three budget phases, with these phases influencing how and when expenditures occur. The three phases are the: Transitional, Stabilization and Community Investment, and a Maintenance Phase. These phases are based on *calendar years*, 2011 through 2013.

Year ONE - 2011: Transitional phase

This phase is estimated to be the most expensive to implement. This is due to the need to support individuals in two locations during the physical closure of FHMC. Funding remained in place for people while their residences were open and staffed at FHMC, no matter how many clients remained in each home. At the same time, funds were spent to open or lease houses at receiving RHCs or community homes before the client moved in.

- Transitional and overlapping expenses are not unexpected. Supports to help people move to new homes while maintaining supports in the former home are essential for client safety. Such types of overlapping costs are standard part of startup costs and capacity building.
- Some clients required extraordinary and supplemental supports to safely move from the center to their new homes.
- The transition phase ended at FHMC when the last clients left in mid-November and remaining staff were laid off at the end of December.

Year TWO - 2012: Stabilization and Community Investment phase.

During this budget phase, the department will experience additional costs to help some individuals stabilized and adjust to their moving and the cost for opening new community services such as the community treatment team and crisis stabilization services. These costs are expected to decrease from the transitional types of services the division has had to provide.

- Considering the major lifestyle changes for some individuals, it could take
 a year or more to understand the psychosocial adjustments clients will
 experience due to moving. Human behavior is not always predictable,
 however the developmental disabilities system is experienced with
 adapting services to meet peoples' needs as they change and adjust to
 new living situations.
- The division is prepared to respond to client changes, but cannot forecast what all those needs will be yet; supports are changed as clients change.

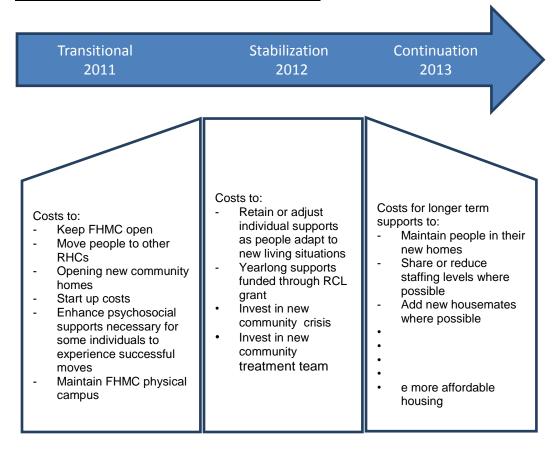
- Activities experienced during this phase will include:
 - Retaining or adjusting individual supports as people adapt to new living situations;
 - Responding to incidents and other concerns;
 - Providing enhanced supports through the Roads to Community Living program using extra federal grant funding.

Year THREE - 2013: Maintenance phase.

This phase maintains established long-term supports for people. The division will provide ongoing individualized supports and expenditures needed to ensure longevity of safe and successful placements for some former FHMC residents.

- The division is experienced with finding costs savings in both RHC and community settings and expects by 2013, there will be additional budgetary efficiencies that can be implemented, for example:
 - Changes to staffing levels where possible;
 - Sharing staff between residential homes;
 - Adding house-mates to homes with vacant bedrooms and good house-mate matches;
 - Find reasonably priced housing;
 - Accessing community natural supports.
- Roads to Community Living Grant funds will phase out but be offset by additional budgetary efficiencies and savings where possible.

Figure 1: Phases of RHC Consolidation Budget



Funding and Methodology:

Funding direction was provided in the appropriations bill, Chapter 50, Laws of 2011, 2SSB 1087 which stated in full:

SECTION 205 (4) SPECIAL PROJECTS*

General FundState Appropriation (FY 2012)	\$4,659,000
General FundState Appropriation (FY 2013)	\$4,659,000
General FundFederal Appropriation	\$9,590,000
General FundPrivate/Local Appropriation	\$ 998,000
TOTAL APPROPRIATION	\$19,906,000*

^{*} Note: this was a biennial appropriation

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- The department shall track the costs and savings of closing Frances Haddon Morgan Center and any investments into community placements and resources.
- The department shall provide a fiscal progress report to the Legislature by December 5, 2011.

Budget Tracking

The legislative direction was to manage the expenditures for the closure activities as a separately tracked project. In order to do that, new budget categories and tracking elements that would typically be included in Category 1000 and Category 2000 areas, were mirrored in Category 8000 budget structure.

All DDD costs in these areas will continue to be charged to Category 8000, the FHMC project budget, until June 30, 2013.

<u>Division of Developmental Disabilities Cost Tracking:</u>

Expenditures directly tracked/monitored by the division include:

- RHC daily rates
- Supported living daily rates
- Professional add on services
- Personal care add on services
- Employment services
- Roads to Community Living (RCL) grant expenditures
- Layoff, unemployment and employee transitional costs

- Physical plant operational costs
- Community crisis stabilization program services
- Community treatment team services
- Community respite

Non-DDD Costs:

There are existing and potential expenditures in other parts of the department, other state agencies and local community services which are not routinely tracked or monitored by DDD. Expenditures in these non-DDD areas are not captured in this fiscal status report.

Some examples include:

- Expenditures by the DSHS Division of Behavioral Health and Recovery for state hospitalization costs *No former FHMC client has received services from any state hospital to date.*
- Expenditures through the DSHS Community Services Division for client allowances and economic assistance - For community clients, other DSHS services include food stamps, economic assistance, mental health services, long term care, vocational rehabilitation and possibly small amounts for child welfare and juvenile rehabilitation or substance abuse programs.
- Expenditures through Health Care Authority (HCA) for specialized medical/dental care - HCA medical assistance programs cover primary and specialty care, hospital, drugs, equipment and therapies that may not be covered by DDD programs; For RHC clients, most medical care, except for hospitalizations and some specialty services, is inclusive within the daily rate.
- Any local law enforcement or first responder costs and impacts.
- Community transportation costs or impacts.
- School district costs and impacts for student aged movers. Three student-aged clients moved to Fircrest School, two of whom attend school at Shoreline school district. The RHC and Shoreline receive impact funds through legislative and Office of Superintendent of Public Instruction to support these students. Five students moved to Kitsap County SOLA homes and two students moved to private supported living. These moves

impacted the Bremerton, Clover Park and South Kitsap School districts who received no associated impact funding.

 Room and board costs that are covered separately by the client using their federal social security benefits are not included in this report. – Most clients use social security income to pay for their own room and board in a community setting. In the RHCs, Social Security income is kept by the facility ("client participation") to pay for the room and board inherent in the RHC service.

An analysis of the non-DDD fiscal impacts will require specifically designed research to accurately study the costs.

When a comparison between non-DDD community and institutional costs was made in 2010, the extra costs of non-DDD services were estimated to be about \$11,000 per year for community clients and \$3,000 per year for RHC clients. The 2010 range of non-DDD expenditures likely remains very similar to what 2012 cost differences might be. This study has not been updated nor have the 2010 costs been adjusted for inflation. The 2010 study is available from DSHS/DDD.

Budget Outcomes

What were the costs to close FHMC and move 52 clients to new homes?

In order to answer this, the following questions are answered:

- 1. What were the costs to move from FHMC to other RHCs?
- 2. What were the comparative costs of new community placements?
- 3. What were the costs for any added professional services and/or personal care services?
- 4. What were the costs for employment/day program services?
- 5. What were Roads to Community Living grant expenditures for family supports; person centered planning approaches, client supports and quality assurance?
- 6. What were the human resources costs to support FHMC employees through the closure?
- 7. What were the costs for closing the FHMC campus?

1. What were the costs to move from FHMC to other RHCs?

Daily rates in the RHCs are projected from allotments and client days. Separate rates are set for each RHC based on their expenditures and costs. The daily rate is matched by the federal government at about 50 percent (50%). The rates in the chart below are claiming rates which include capital costs, specialized IMR tax, indirect costs and no adjustments for room and board contributions from clients.

FHMC daily rate of \$541 per day or \$197,465 per year is used a baseline to calculate differences between the various client moves to the other RHCs.

RHC rates

RHC	Clients	FY11	FY12	Difference from FHMC (base cost)	Total Variance from FHMC
FHMC	0	\$ 541/day	\$ 985*	N/A	N/A
		\$197,465/year			
Fircrest School	18 clients	\$ 648/day	\$ 628/day	\$87/day	\$571,590/year
3011001		\$236,520/year	\$229,220/year	\$31,755/year/person	
Lakeland	2 clients	\$ 590/day	\$ 624/day	\$83/day	\$60,590/year
Village		\$215,350/year	\$227,760/year	\$30,295 /year/person	
Rainier School	1 client	\$ 495/day	\$ 484/day	(\$57)/day	(\$20,805)/year
301001		\$180,675/year	\$179,660/year	(\$20,805)/year/person	

^{*}Note: This report uses \$541 per day as the base rate for FHMC services. The high daily rate in FY12 for FHMC is due to diminishing population at FHMC while complete operational and support services remained in place at the center during the closure months. As the clients moved from the center, the organizational infrastructure and physical plant continued to function, creating a distortion of any economy of scale. With the last clients moving out of the facility about six weeks prior to the December 31, 2011 closing date, the ongoing operational costs of the facility significantly dropped. The \$985 daily rate is not valid to use for RHC to RHC comparison purposes.

The cost to move 21 clients from FHMC to other RHCs is \$611,375 more per year.

Net added cost	per vear	\$611.375
Rainier School (n=1)	savings/yr	(\$ 20,805)
Lakeland Village (n=2)	cost per year	\$ 60,590
Fircrest School (n= 18)	cost per year	\$571,590

2. What were the comparative costs of new community placements?

Individually customized rates are set prospectively for those in private supported living homes. Historical experience is that privately operated supportive living rates are slightly less than those for state operated programs due to wage and benefit differences. This holds true for the clients who have moved from FHMC. The figures in the chart below are the current experience for *only the FHMC clients* who have moved and does not compare the FHMC movers with others across the state who receive supported living or SOLA supports.

Community residential services rates for FHMC movers

Service Type	Projected Daily Rate	FY12 – Actual Range	FY12 – Actual Average	Yearly Costs/Person
SOLA	\$ 390	\$336 to \$577	\$402	\$146,730
Supported Living	\$ 314	\$167 to \$472	\$299	\$109,135
FHMC daily rate for comparison purposes			\$541	\$197,465 / year

The projected daily rate was the amount estimated by DDD prior to the implementation of the FHMC closure. The division experience to date is that the rates are within a reasonable range for clients of similar acuity and recency of placement. If the budget phases occur as expected, the rates for both private and state operated, will likely decrease over time as clients stabilize in their new homes.

The daily rate comparison between the RHCs, SOLA, and community residential homes follows:

Comparative Daily Rates



SOLA costs \$37,595 more per year than community private services. The cost difference is mainly due to the wage and benefit differences for state employees as compared to employees in the private sector. However, even with the greater cost for SOLA residential services as compared to privately run services, there is still a significant savings for the 31 individuals who moved from FHMC to community homes.

Savings of Community Cost vs. FHMC cost

Residential Service	# Clients	Daily Rate	Annual costs
SOLA	17	\$402/day	\$2,494,410
Private Residential	14	\$299/day	\$1,527,870
Total Commu	nity Residential	costs for one year	\$4,022,300
Compared to FHMC daily rate	(31)	\$541/day	\$6,121,315
		NET SAVINGS	\$2,099,015

3. What were the costs for any added professional services and/or personal care services per client?

Professional Services are professional, technical, and specialties that are not provided or funded by Medicaid or private insurance. Professional services may include therapies, behavioral experts, and other ancillary needs.

Personal care service includes assistance with dressing, eating, grooming, bathing, and other daily living activities along with the routines of daily living such as laundry, cleaning and other support needs.

Add on services	GF-State	GF- Federal	Total
Professional services to date	\$1,771	\$5,312	\$7,068
Personal care services to date	\$330	\$330	\$660
TOTAL COST to date	\$2,101	\$5,642	\$7,728

4. What were the costs for employment and day program services?

Employment and day program services includes supports for individual supported employment, group supported employment, community access services and individualized technical assistance as part of a person's pathway to employment. Persons who moved to other RHCs have been employed within the facilities existing day programs. Not all persons who have moved to the community have been employed yet. Eighteen (18) clients have an employment provider identified although may not have started working yet. Six (6) clients are in school programs and six (6) others are not connected to any day program or employment service.

Add on services	GF-State	GF- Federal	Total
Employment costs to date	\$5,462	\$10,537	\$15,999

5. What were Roads to Community Living (RCL) grant expenditures for family supports, person centered planning approaches other client supports and quality assurance?

RCL is part of the federal Money Follows the Person (MFP) grant funds for adults and children who are considering moving into the community from institutional settings. RCL team members offer clients and families direct consultation and advice when making the decision to move or not. They work with clients and families in the institutional environment to help prepare for the move. The RCL grant provides services that are tailored to the individual and family's unique needs and desires. Some of the services RCL funding provides include:

- Helping individuals and their family/guardians make better informed decisions regarding where to live and what supports are needed to live in the community successfully.
- Financially assisting transitions from the RHC to the community by building collaborative partnerships with everyone involved in the person's life.
- Providing enhanced federal funding. The RCL grant is used to provide additional federal matching funds for many community services. The RCL grant contributions result in a 75 percent federal match of funding (rather than the typical 50 percent match) for residential supports as well as community services for the first year after a client leaves the RHC.

In January 2011, the three member RCL team initiated their support of FHMC through the closure. RCL grant expenditures for salaries and benefits for the 2011 calendar year are 100 percent federal grant monies.

RCL TEAM	Jan – June 2011	July – Dec 2011	Total
Salaries	\$ 94,564	\$ 95,288	\$ 198,782
Benefits	\$ 27,757	\$ 28,777	\$ 59,050
Total	\$ 122,321	\$ 124,065	\$ 257,832

RCL staff enhanced existing processes and provided centralized coordination, expertise, and oversight during closure. Specific RCL grant expenditures included:

RCL Ac	tivities and Funded Supports	Expenditure
Educating and	Family Events	\$593
counseling families	Video Projects	\$8,451
Participating in client	Person Centered Plan consultations	\$6,357
transitions –	Nursing Assessments	\$225
developing person	Risk Assessments	\$1,800
centered plans with families and staff	Client Evaluations	\$28,720
Direct contact and consultation to staff,	Direct consultation from RCL team members	No cost
providers and families	Inclusion conferences for staff / providers / families	\$25,970
Technical assistance	Safety Assessments	\$6,403
	Assistive Technology	\$1,195
	Environmental Supports	\$1,334
	Housing searches	\$1,500
	Housing adaptations	\$6,096
	Adaptive equipment	\$1,098
Start Up assistance	Community Transition	\$12,050
	Program Development	\$30,195
	Rental subsidies	\$1,645
	SOLA Client Subsidy	\$36,389
	Rentals and Leases (Base Rent)	\$23,126
Quality Assurance	DD Council quality of life survey	\$3,500

Total \$195,549

An additional DDD quality assurance report is available at: http://www.dshs.wa.gov/ddd/RHC/documents/The%20Closure%20of%20FH MC%20-%20A%20Quality%20Assurance%20Report%20.pdf.

The initial survey data from the DDD quality assurance activities show that the great majority of clients and families are satisfied with the move decisions they made and how well the client is adjusting to their new residence.

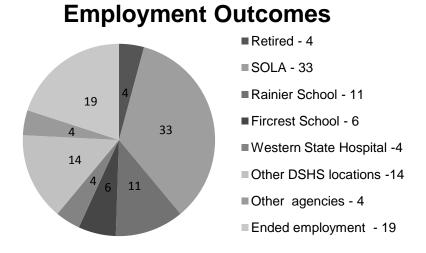
6. What were the human resources costs to support FHMC employees through the closure?

Closing FHMC resulted in staff reduction of about 130 employees from the center. Ninety-five (95) of these employees were permanent state employees who went through formal layoff.

The employee support objectives included:

- Providing successful employment transitions to every affected employee who chose to continue state employment;
- Negotiating successful plans for employee transitions with affected unions;
- Providing DSHS human resources consultation and counseling to every employee as desired;
- Assigning extra DSHS Human Resources expertise throughout the closure activities.

Of the 95 affected employees, 72 transitioned to other state jobs, most within DSHS, four (4) retired, and nineteen (19) decided to leave state employment.



The cost for completing most employee transitional activities was minimal.

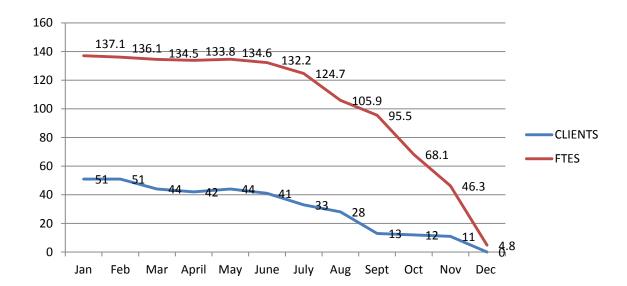
Human Resources Activities	Expenditure
Employee transitions No requests have been approved for employee relocation expenses; employee travel costs were minimal for visits to new job sites; employee travel expenses were not tracked separately	Within existing resources
Employee retirements and leave buyout (n=4) No retirement incentives were paid; leave buyout occurred for 4 retirees	\$22,594
Employee re-training Nurse delegation training was conducted for 12 employees transferring to new SOLA jobs prior to them leaving FHMC employment	Within existing resources
Human Resources consultation HR assigned additional managers and specialists to assist; Labor relation consultation was ongoing; HR management provided individual counseling to any employee who requested it; Multiple employee layoff training sessions were held on campus; HR staff work hours and travel costs were not tracked separately	Redistributed work within existing resources
Layoff orientations Conducted by DOP and Work Source at the	No DSHS costs

Specific tracking of staff work hours that were internally reassigned to closure tasks and increases in charges for travel or overtime was not independently tracked. A separate analysis would be needed to estimate these workload adjustments to accomplish the closure.

As clients moved, staff was proportionally reduced. A small number of positions remained at the center until the December 31, 2011, closing date.

FHMC work site

Employee Reduction



Unemployment charges increased at FHMC at the end of 2011. The majority of these claims are from employees who choose to not continue with any state employment and claims from non-permanent workers. It is expected this trend will continue for the first and second quarters of 2012.

Quarter	Unemployment charges – 2011	Number of employees
First 2011	\$15,001.46	13
Second 2011	\$8,391.61	14
Third 2011	\$10,981.23	15
Fourth 2011	\$50,707.07	27*
TOTAL	\$85,081.37	69

^{*}Note: 27 employees receiving unemployment include both the permanent employees (n=19) who chose to leave state service as opposed to being laid off and other employees whose non-permanent appointments were terminated.

7. What were the costs for closing the FHMC physical campus?

The primary goal for closing FHMC was to find new homes for the residents and ensure a safe transition. Closing the FHMC physical campus was addressed the way one might close a business – let employees go, manage

property use, be mindful of the potential future use of the property, liquidate assets and address excess inventory, eliminate or transfer business functions, and ensure accountability for all of these closure activities.

The specific costs for staff work hours, reassignment of work tasks and savings from using up inventory on hand, transferring supplies and closing down some buildings was not specifically tracked. A more extensive study would be required to identify the internal expenditures and/or potential savings from these various activities.

Employee layoffs and managing the staffing levels and reductions were the most complex operational activity for closing the campus and ending the center's services. Labor agreements were made with the Washington Federation of State Employees (WFSE) in July 2011 and with Service Employees International Union (SEIU) in August 2011.

Staff reduction was planned so that laid off employees would not have long delays in transitioning to new job sites; for example, 33 FHMC staff transferred to new Kitsap County SOLA employment in one day, thus avoiding a 15 to 30 day lay-off notification period.

Support staff for kitchen, maintenance, custodial services and other operations was proportionally reduced as groups of clients left.

Staffing levels for safety and supervision had to be maintained. While staffing was reduced proportionately whenever possible, direct care staff remained in place until all clients were moved, no matter what limited number of clients remained.

Staff was assigned to complete very individualized client transitions to new homes. Most transitions were scheduled within existing staff work hours however, occasional overtime or staff call-in were needed to ensure client transitions occurred as scheduled. Overall, overtime reduced as staffing and client numbers reduced.

Individual employees made the decision to resign or leave employment earlier than expected. These employee losses resulted in workload shifts to the remaining employees rather than hiring replacement staff for a few weeks or months. This saved salary and benefit costs, but put greater demands, duties and responsibilities on the diminishing number of remaining employee. The remaining staff had to learn new duties, absorb others' workload and carry out the work that had to be done to close the center along with maintain necessary business continuity until December 31, 2011.

As of January 1, 2012, DDD no longer operates the former FHMC campus. DSHS organizationally pooled resources and consolidated maintenance operations for western Washington facilities into a new departmental unit, Consolidated Maintenance and Operations (CMO). DSHS CMO has the lead responsibility to maintain the campus for future use.

The campus has been renamed to the Olympic Center and continues to support other tenants. These tenants divide the current costs for the areas on the campus that remain in use.

- DSHS Division of Children and Family Services Kitsap offices
- DSHS DDD Field Services for Kitsap County
- DSHS DDD Kitsap SOLA offices

The Bremerton School District plans to lease part of the Olympic Center for a new alternative school and lease the kitchen and warehouse for school food services. This, and other possible short-term leases, can bring new revenue of \$40,000 to \$75,000 or more to offset the costs to maintain the campus.

In separate legislation, ESHB 1497, funds were appropriated to the department to consider options for the future use of the FHMC and YVS campuses. As authorized by the Legislature, options could include permanent use of the properties to support housing, other services for low-income, disabled or vulnerable persons or other uses. The study was managed by DSHS Operations Support and Services Division (OSSD) and conducted by Inova, a private real estate/property consultant.

DDD partnered with OSSD for these two studies. The studies included real estate market analysis, site condition assessments, public feedback about the properties use and consideration of possible re-use options. These studies may be helpful to the 2011-12 Legislative Task Force on the Developmental Disabilities Service System.

The FHMC report can be found at:

http://www.dshs.wa.gov/ddd/RHC/documents/FHMC%20Predesign%20Study%20for%20Future%20Use%20Options.pdf

The YVS report can be found at:

http://www.dshs.wa.gov/ddd/RHC/documents/YVS%20Predesign%20Study%20for%20Future%20Use%20Options.pdf

The appropriation for these two studies was \$300,000.

The closure team at FHMC also liquidated assets and excess inventory as efficiently as possible. Other than about \$2,000 in plywood costs, existing materials from FHMC on-hand supplies were used to mothball the residences, close parts of the campus, conduct clean-up activities, transfer archived records to storage and surplus remaining equipment and supplies. Labor for this was supplied by existing FHMC employees, occasionally supported by extra Rainier School maintenance employees.

Client meal costs were controlled by limiting menu selections and consuming the food inventories on hand. Remaining kitchen supplies and food inventory were transferred to other DDD RHCs or DSHS institutions for their use. Nothing was wasted.

Available supplies, materials, equipment and consumable inventories whether new or used, were transferred to other RHCs or DDD offices. Some state equipment, such as beds, dressers, wardrobes, TVs, and other furnishings used by FHMC clients were transferred to clients who moved to Supported Living or SOLA settings, thus avoiding higher start-up costs for those clients. The savings from the furniture transfers was not tracked. Other state equipment and furnishings have been inventoried at the FHMC campus for future use by the Community Crisis Stabilization Services treatment site when it opens. This will help reduce the start-up costs for these community based programs.

Towards the end of the process, business operations were transitioned to Rainier School fiscal management. Rainier School staff continued basic services during the last few months of operations. As of this report, Rainier School and centralized DSHS institutional business services continue to provide business supports to finish wrap-up activities resulting from the closure. There remain many months of bill paying, unemployment compensation and other types of concluding activities.

As staff levels reduced, offices were consolidated so that parts of the administrative buildings could be closed, thus lowering utility bills, cancelling phone and computer connections and closing vacant or under-utilized building spaces where possible. See Attachment A for Fiscal Year 2012 monthly tracking of operational expenditures.

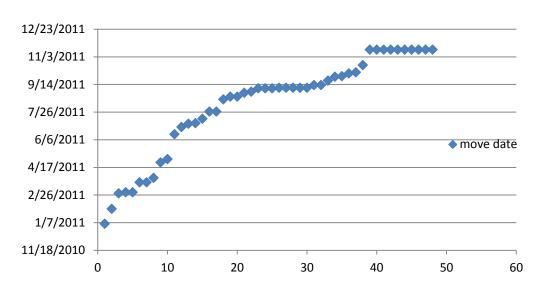
DSHS Operations Review and Consultation internal auditors have monitored the overall business functions throughout the closure. The DSHS auditors plan to complete an ending audit of inventory, records accountability, financial and other internal controls at a future date. The costs to conduct this monitoring and final audit could be computed when completed.

While closing the buildings and business functions of the center was done through operational decisions, moving the clients was much more personalized. The FHMC residences were closed according to the schedule and rate at which clients and their families chose to move. The Legislative decision to close the center was not made until late May 2011. Although some residents moved prior to May, the majority of residents moved between June and November. Families and clients participated in developing individual agreements as to when and how transitional moves would occur and what supports would be necessary to ensure a successful move. Family/guardian choice was paramount. Many families did not make their choice until after the final legislative decision.

The department minimized client disruption by ensuring they were not subject to multiple internal moves or temporary relocations prior to the move to a new home away from the center. Most clients were able to remain in place at their residence until their official move day. By respecting client choice and not forcing internal moves upon clients, the facility incurred additional costs to keep some buildings open and staffed for periods of time where the homes were at very minimal capacity.

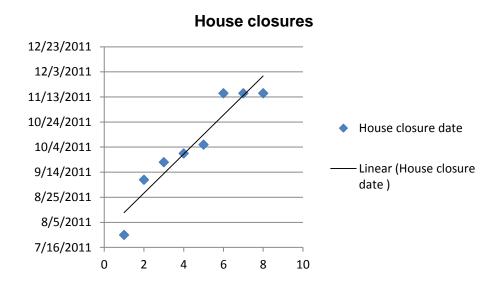
Clients moved at a steady rate. Most clients moved after June 1, 2011.

Client Moves



The FHMC homes are designed as duplex situations with either four or eight people living in each side of the duplex. There were four different homes at FHMC, therefore eight duplexes were phased out. The first duplex closed on July 26, 2011. Three more duplexes closed by the end of September; one in

October; three duplexes remained open until the last day, November 16, 2011. The three duplexes which remained open in mid-November supported 11 individuals in residence and maintained reduced, but safe staffing levels 24 hour/day.



The move dates for individual clients, and ultimate house closure dates were set based on the individuals' response to visits and transitioning to new homes, family choices, provider readiness and availability and employee schedules. Setting client move dates by individual planning variations and choices rather than moving clients on a controlled schedule is more fiscally inefficient. A preestablished closure schedule that set dates for house closure would be a more cost effective way to move clients and close the homes.

Operational Cost/Savings Summary:

Overall operational costs have decreased. The chart below compares the monthly average of Fiscal Year 2011 budget object actual expenditures with Fiscal Year 2012 costs. Fiscal Year 2012 costs are based on an eight (8) month year period.

All average monthly costs have decreased other than a slight increase in monthly data processing charges. Attachment A is a more detailed month by month comparison for Fiscal Year 2012.

Object	Category	Category 2000 FY11	FY11 12 month average	Category 2000 & 8000 FY12	FY12 8 month average
Α	Salaries & Wages	\$5,058,711	\$421,559	\$1,398,374	\$174,797
В	Employee Benefits	2,547,050	212,254	866,820	108,352

Object	Category	Category 2000 FY11	FY11 12 month average	Category 2000 & 8000 FY12	FY12 8 month average	
EA	Supplies & Materials	335,036	27,919	69,151	8,644	
EB	Communications / Telecommunications	32,835	2,736	16,075	2,009	
EC	Utilities	223,094	18,591	75,165	9,396	
EE	Repairs, Alterations and Maintenance			1,832	229	
EF	Printing & Reproduction	699	58	340	42	
EG	Employee Training	5,209	434	1		
EH	Rentals & Leases (Furniture/Equipment)	5,917	493	2,216	277	
EL	Data Processing 4,505 375 Services		375	3,103	388	
EN	Personnel Services	27,361	2,280	6,787	848	
ER	Other Purchased Services	, , , , , , , , , , , , , , , , , , , ,		110,686	13,836	
ES	Vehicle Maintenance & Operating Costs	6,594	549	3,253	407	
EZ	Other Goods & Services	616,405	51,367	220,366	27,546	
Sub-Tota	al Object E	1,684,804	140,400	288,608	36,076	
G	Travel	2,028	169	803	100	
	School district charges	60,810	5,067	0	0	
J	Replacement Equipment	5,206	434	0	0	
N	Benefits & Client Services	39,041	3,253	18,014	2,252	
Р	Debt Service	50,905	4,242	18,978	2,372	
Т	Intra Agency	(122,241)	(10,187)	(56,292)	(7,037)	
	Total Expenditures	\$9,326,313	\$777,189	\$2,755,671	\$344,458	

Budget Summary for Fiscal Year 2012 - Category 8000

The funds allotted to FHMC have been allotted and spent per the summary chart below. Projections are based on experience to date.

Category 8000	FYTD Expenditures \$ through February	FY12 \$ Allotment	FYTD \$ Variance	Projected \$ Expenditures	FY \$ Variance	
Frances Hado	lon Morgan Cente	er				
GF-State	1,414,392	4,648,000	3,233,608	300,000	2,933,608	
Federal	1,471,883	4,790,000	3,318,117	-	3,318,117	

Category 8000	FYTD Expenditures \$ through February	FY12 \$ Allotment	FYTD \$ Variance	Projected \$ Expenditures	FY \$ Variance							
Local	39,893	499,000	459,107	-	459,107							
Sub Total	2,926,168	9,937,000	7,010,832	300,000	6,710,832							
Fircrest School	ol (18 residents)											
GF-State	1,128,802	-	(1,128,802)	652,303	(1,781,105)							
Federal	1,128,802	-	(1,128,802)	652,303	(1,781,105)							
Sub Total	2,257,604	-	(2,257,604)	1,304,606	(3,562,210)							
Rainier Schoo	l (1 resident)											
GF-State	35,239	-	(35,239)	27,916	(63,155)							
Federal	35,239	-	(35,239)	27,916	(63,155)							
Sub Total	70,478	-	(70,478)	55,832	(126,310)							
Lakeland Villa	Lakeland Village (2 residents)											
GF-State	143,935	-	(143,935)	71,968	(215,903)							
Federal	143,935	-	(143,935)	71,968	(215,903)							
Sub Total	287,870	-	(287,870)	143,936	(431,806)							
Community F	Community Residential Programs (14 clients)											
GF-State	172,986	-	(172,986)	127,875	(300,861)							
Federal	492,603	-	(492,603)	383,624	(876,227)							
Sub Total	665,589	-	(665,589)	511,499	(1,177,088)							
Personal Care	e Services											
GF-State	330	-	(330)	-	(330)							
Federal	330	-	(330)	-	(330)							
Sub Total	660	-	(660)	-	(660)							
Professional	Services											
GF-State	1,771	-	(1,771)	-	(1,771)							
Federal	5,312	-	(5,312)	-	(5,312)							
Sub Total	7,083	-	(7,083)	-	(7,083)							
Employment	& Day											
GF-State	5,462	-	(5,462)	6,000	(11,462)							
Federal	10,537	-	(10,537)	19,000	(29,537)							
Sub Total	15,999	-	(15,999)	25,000	(40,999)							
State Operate	ed Living Alternat	ives (17 resident	ts)									
GF-State	234,520	-	(234,520)	214,717	(449,237)							
Federal	703,560	-	(703,560)	644,151	(1,347,711)							
Sub Total	938,080	-	(938,080)	858,868	(1,796,948)							
		T	OTALS									
GF-State	3,137,437	4,648,000	1,510,563	1,400,779	109,784							
Federal	3,992,201	4,790,000	797,799	1,798,962	(1,001,163)							
Local	39,893	499,000	459,107	-	459,107							

Category 8000	FYTD Expenditures \$ through February	FY12 \$ Allotment	FYTD \$ Variance	Projected \$ Expenditures	FY \$ Variance
Total	7,169,531	9,937,000	2,767,469	3,199,741	(432,272)

Although overspent in total funds, there is an estimated savings of \$109,784 of GF-State dollars.

What will the costs be for new community investments?

Community Crisis Stabilization Services Program:

Community Crisis Stabilization Services (CCSS) is a new state operated community program that provides services and supports to eligible clients during a crisis in an alternative setting to the person's residence.

Community Crisis Stabilization Services will be time limited, and are not expected to exceed 180 days. DDD intends to establish three locations – one location for children and youth (up to age 21) and one location for up to three adults on the west side of the state. A third location is planned for the Yakima area if funding allows. These homes are intensely staffed 24/7 by state employees to support people through therapy, behavior support and medical services as needed.

Lack of appropriate housing for the CCSS program caused postponement in the opening of this service. At this date, the division has leased one home in Lakewood and first referrals may be accepted in June-July 2012. The first home established will be for student-aged persons, 21 and under, DDD is searching for an appropriate location for the second, adult home.

The manager for this program was hired March 1, 2012. The CCSS manager is searching for a second location and hiring CCSS employees.

This service has been added to the Home and Community Based Waiver menu of service. The division intends to seek federal matching funds for this service whenever possible. There are possible efficiencies and savings that may occur as the programs grows – for example, it is possible one treatment residence would be able to support four individuals rather than three for the same staffing level. This cannot be determined without actual residential treatment experience by this new team.

Community Treatment Team Services:

A state operated community treatment team for clinical and professional resources will be based in Pierce County. Recruitment announcements for Treatment Team members are being made in March through May of 2012. All members should be hired by July 1, 2012.

Community Respite:

The intent of 2SSB 5459 was to expand respite services in those geographic areas with the greatest need. Contracts for enhanced respite services have been developed.

The crisis/enhanced respite daily rate was projected to be: \$ 275 per day
The proposed contract rate for this service is: \$ 290 per day

It is possible that the new community crisis stabilization services residential treatment site may be able to use any existing vacancies for intensive respite purposes. This will be evaluated after this new program has several months of experience in the actual setting.

These program costs will vary according to size and intensity of the needs of the persons supported.

Summary of New Community Investments

FY13 projections	FY13 projections: Crisis Stabilization Costs - 1 home for children										
Service Need	Projection	Explanation									
Staffing for a 3 bed home	1,369,000	19 FTEs									
Housing	68,000	1 home - lease, utilities, food, recreation, transportation, and start-up									
Specialty Providers	133,000	psychiatrist, therapists, etc.									
Subtotal	1,570,000										

FY	/13 projection	s: Treatment Team	
Subtotal	400,000	4 professional employee FTEs	

FY13 projections: Crisis Stabilization Costs (if a second home for adults is established)

FY13 Subtotal 1,428,000 projected costs for second 2 bed home

Fiscal Year 2013 Projected Costs:

In addition to the costs of supporting former FHMC clients, Fiscal Year 2013 costs will include the full development and implementation of the three new community services. The continued admissions freeze at YVS may result in some additional savings during Fiscal Year 2013. Attachment B is a more detailed summary of Fiscal Year 2013 projections.

Category 8000 projections for Fiscal Year 2013 (total funds):

FY 13 Summary of Projected Savings & Costs	
FHMC Allocation in FY 13	9,953,000
RHC Costs for FHMC movers	4,512,000
Community Costs for FHMC movers	4,201,000
Savings	1,240,000
New Community Based Services	
Crisis Stabilization Home - children	1,570,000
Crisis Stabilization Home - adult	1,428,000
Treatment Team	400,000
	3,398,000
FY 13 Additional Need	(2,158,000)

Next Steps:

2SSB 5459 established a Legislative task force to study the Developmental Disabilities System of Services. The task force report is scheduled to be released in December 2012.

ATTACHMENT A MONTHLY TRACKING OF FHMC OPERATIONAL EXPENDITURES FY2012

H36 - FHMC (Category 2000 & 8000)

Fiscal Year 2012 Status through February 2012

ALLOTMENTS	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	FYTD
FTEs*	272.0	272.0	272.0	272.0	272.0	272.0	(4.0)	(4.0)	(4.0)	(4.0)	(4.0)	(4.0)	203.0
Salaries (A)	434,000	424,000	434,000	423,000	458,000	445,000	-	-	-	-	-	-	2,618,000
Benefits (B)	223,000	218,000	223,000	218,000	235,000	224,000	(16,000)	-	-	-	-	-	1,325,000
Contracts (C)	-	-	-	-	-	-	-	-	-	-	-	-	-
Goods & Serv (E)	152,000	148,000	148,000	148,000	154,000	144,000	-	-	-	-	-	-	894,000
Utilities (EC)	16,000	16,000	16,000	18,000	21,000	18,400	-	-	-	-	-	-	105,400
IMR (EZ)	-	-	-	-	-	-	-	-	-	-	-	-	-
Travel (G)	5,000	5,000	4,000	5,000	6,000	4,000	-	-	-	-	-	-	29,000
Equipment (JA)	-	-	-	-	-	-	-	-	-	-	-	-	-
Other (N)	4,700	3,700	3,700	3,700	3,700	3,500	816,500	817,500	817,500	817,500	817,500	817,500	1,657,000
Debt Service (P)	3,800	2,800	2,800	2,800	2,700	2,700	-	-	-	-	-	-	17,600
Interagency (S)	-	-	-	-	-	-	-	-	-	-	-	-	-
Intra Agency (T)	-	-	-	-	-	-	-	-	-	-	-	-	-
Intra Agency (TZ)	3,500	3,500	3,500	3,500	3,500	3,500	-	-	-	-	-	-	21,000
TOTAL ALLOTTED	842,000	821,000	835,000	822,000	883,900	845,100	800,500	817,500	817,500	817,500	817,500	817,500	6,667,000

^{*}FTE allocation for FY12 was allotted into the first six months of the FY

ATTACHMENT A MONTHLY TRACKING OF FHMC OPERATIONAL EXPENDITURES FISCAL YEAR 2012

EXPENDITURES	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar- 12	Apr- 12	May- 12	Jun- 12	FYTD
FTEs	124.7	105.9	95.5	68.1	46.3	4.8	(7.4)	.3	-	-	-	-	54.8
Salaries (A)	381,728	325,365	301,439	237,266	164,069	31,941	(43,011)	(423)	-	-	-	-	1,398,374
Benefits (B)	215,245	186,504	188,236	131,707	76,485	17,323	50,099	1,221	-	-	-	-	866,820
Goods & Serv (E)	63,604	46,726	21,538	39,616	37,911	4,824	(2,714)	1,938	-	-	-	-	213,443
Utilities (EC)	26,480	(4,001)	649	7,990	9,871	13,768	20,407	-	-	-	-	-	75,165
IMR (EZ)	64,238	(5,463)	51,964	40,007	(39,856)	55,095	54,123	258	-	-	-	-	220,366
Travel (G)	-	320	35	113	336	-	-	-	-	-	-	-	803
Equipment (JA)	420	-	118	2	(540)	-	-	-	-	-	-	-	0
Other (N)	3,190	3,524	3,419	3,321	2,351	2,209	-	-	-	-	-	-	18,014
Debt Service (P)	12,948	-	-	52	(13,000)	-	18,978	-	-	-	-	-	18,978
Interagency (S)	-	-	-	-	-	-	-	-	-	-	-	-	-
Intra Agency (T)	(12,019)	(10,937)	(10,335)	(10,864)	-	-	127	(23,981)	-	-	-	-	(68,008)
Intra Agency (TZ)	1,810	1,778	1,723	1,665	1,254	1,175	1,155	1,155	-	-	-	-	11,716
TOTAL EXPENDED	757,644	543,817	558,786	450,875	238,881	126,334	99,165	(19,831)	-	-	-	-	2,755,671

ATTACHMENT A MONTHLY TRACKING OF FHMC OPERATIONAL EXPENDITURES FISCAL YEAR 2012

VARIANCES	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	FYTD
Salaries (A)	52,272	98,635	132,561	185,734	293,931	413,059	43,011	423	-	-	-	-	1,219,626
Benefits (B)	7,755	31,496	34,764	86,293	158,515	206,677	(66,099)	(1,221)	-	-	-	-	458,180
Contracts (C)	-	-	-	-	-	-	-	-	-	-	-	-	-
Goods & Serv (E)	88,396	101,274	126,462	108,384	116,089	139,176	2,714	(1,938)	-	-	-	-	680,557
Utilities (EC)	(10,480)	20,001	15,351	10,010	11,129	4,632	(20,407)	-	-	-	-	-	30,235
IMR (EZ)	(64,238)	5,463	(51,964)	(40,007)	39,856	(55,095)	(54,123)	(258)	-	-	-	-	(220,366)
Travel (G)	5,000	4,680	3,965	4,888	5,664	4,000	-	-	-	-	-	-	28,197
Equipment (JA)	(420)	-	(118)	(2)	540	-	-	-	-	-	-	-	(0)
Other (N)	1,510	176	281	379	1,349	1,291	816,500	817,500	817,500	817,500	817,500	817,500	1,638,986
Debt Service (P)	(9,148)	2,800	2,800	2,748	15,700	2,700	(18,978)	-	-	-	-	-	(1,378)
Interagency (S)	-	-	-	-	-	-	-	-	-	-	-	-	-
Intra Agency (T)	12,019	10,937	10,335	10,864	-	-	(127)	23,981	-	-	-	-	68,008
Intra Agency (TZ)	1,690	1,722	1,777	1,835	2,246	2,325	(1,155)	(1,155)	-	-	-	-	9,284
TOTAL VARIANCE	84,356	277,183	276,214	371,125	645,019	718,766	701,335	837,331	817,500	817,500	817,500	817,500	3,911,329

ATTACHMENT A MONTHLY TRACKING OF FHMC OPERATIONAL EXPENDITURES FISCAL YEAR 2012

FUND SOURCE

ALLOTMENTS	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	FYTD
State	393,500	382,500	388,500	381,500	415,500	396,500	372,500	383,500	383,500	383,500	383,500	383,500	3,114,000
Federal	404,300	397,300	404,300	398,300	425,300	407,500	388,000	393,000	393,000	393,000	393,000	393,000	3,218,000
Local	44,200	41,200	42,200	42,200	43,100	41,100	40,000	41,000	41,000	41,000	41,000	41,000	335,000
TOTAL ALLOTTED	842,000	821,000	835,000	822,000	883,900	845,100	800,500	817,500	817,500	817,500	817,500	817,500	6,667,000
EXPENDITURE	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	FYTD
State	433,312	38,909	90,854	506,445	58,221	55,829	80,156	(20,493)	-	-	-	-	1,243,233
Federal	309,332	504,908	450,715	(51,886)	182,051	69,854	6,910	662	-	-	-	-	1,472,545
Local	15,000	-	17,217	(3,683)	(1,392)	651	12,100	-	-	-	-	-	39,893
TOTAL EXPENDED	757,644	543,817	558,786	450,875	238,881	126,334	99,165	(19,831)	-	•	-	-	2,755,671
VARIANCES	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	FYTD
State	(39,812)	343,591	297,646	(124,945)	357,279	340,671	292,344	403,993	383,500	383,500	383,500	383,500	1,870,767
Federal	94,968	(107,608)	(46,415)	450,186	243,249	337,646	381,090	392,338	393,000	393,000	393,000	393,000	1,745,455
Local	29,200	41,200	24,983	45,883	44,492	40,449	27,900	41,000	41,000	41,000	41,000	41,000	295,107
TOTAL VARIANCE	84,356	277,183	276,214	371,125	645,019	718,766	701,335	837,331	817,500	817,500	817,500	817,500	3,911,329

ATTACHMENT B FISCAL YEAR 2013 PROJECTIONS

Category 8000 projections for FY13 (total funds)								
FHMC appropriation	9,953,000	FY 13 allotment in Category 8000						
Fircrest	(3,912,000)	for 18 residents @ \$326,000 per month						
Rainier	(168,000)	for 1 resident @ \$14,000 per month						
Lakeland	(432,000)	for 2 residents @ \$36,000 per month						
FHMC	-	unknown what if any costs may still occur						
Category 2000 (RHC's) Costs	(4,512,000)							
H51 - Residential	(1,536,000)	for 14 clients @ \$128,000 per month						
H52 - Personal Care	(5,000)	? - best guess estimate based on FY 12 to date transfer						
H54 - Professional Services	(25,000)	? - best guess estimate based on FY 12 to date transfer						
H55 - Employment & Day	(55,000)	? - best guess estimate based on FY 12 to date transfer						
H59 - SOLA	(2,580,000)	for 17 clients @ \$215,000 per month						
Category 1000 (Community) Costs	(4,201,000)							
Estimated FY 13 costs (52 FHMC residents)	(8,713,000)							
(equals line 10 plus line 17)								
Balance in FY 13 for FHMC client expenses	1,240,000							
(line 4 minus line 19)								
Crisis Stabilization Costs - 1 home								
Staffing (three bed home)	(1,369,000)	19 FTE's						
Housing	(68,000)	1 home (lease, utilities, food, rec, transportation, start-up)						
Speciality Providers	(133,000)	psychiatrist, speech/physical therapists, etc						
	(1,570,000)							
Treatment Team	(400,000)	4 FTE's						
FY 13 balance = (line 21 plus lines 28 and 30)	(730,000)	FY 13 balance with opening one crisis stabilization home (3 bed children) and treatment team						
Crisis Stabilization Costs - 2nd home	(1,428,000)	C2S2 FY 13 projected costs for second - 2 bed home						
FY 13 balance = (line 32 plus line 35)	(2,158,000)	FY 13 balance with opening two crisis stabilization homes (5 be 3 children, 2 adult) and treatment team						